



<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 16159/012001;P5534CNT
Application No. 09/803,835-Conf. #9990	Filing Date March 12, 2001	Examiner O. E. Garcia	Art Unit 2123
Applicant(s): Martin Ryzl			
Invention: MODULE FOR DEVELOPING WIRELESS DEVICE APPLICATIONS USING AN INTEGRATED EMULATOR			

**TO THE COMMISSIONER FOR PATENTS**

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	15	- 20 =		x	0.00
Independent Claims	3	- 3 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					

- ☒ Large Entity ☐ Small Entity
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- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
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- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.
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- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

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Dated: November 23, 2004

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Signature: *Yuki Tsukuda* (Yuki Tsukuda)



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/803,835-Conf. #9990	
	Filing Date	March 12, 2001	
	First Named Inventor	Martin Ryzl	
	Art Unit	2123	
	Examiner Name	O. E. Garcia	
Total Number of Pages in This Submission	19	Attorney Docket Number	16159/012001; P5534CNT

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	OSHA & MAY L.L.P.		
Signature			
Printed name	Jonathan P. Osha		
Date	November 23, 2004	Reg. No.	33,986

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